

Henrico Local Human Rights Committee
Henrico Area Mental Health and Developmental Services
Conference Room B
10299 Woodman Road
Glen Allen, Virginia 23060
July 9, 2013
6:00 PM

- I. Call to Order at 6:01 PM by Ed McIntosh, Chair.
- II. Approval of Minutes
 - a. Group A Minutes were approved.
 - i. Laura Buracker made the First Motion.
 - ii. Mr. Brown made the Second Motion.
- III. Public Comment
 - a. Mr. Small and Mr. McIntosh explained the purpose of this section, noting that if any affiliate has anything to say, i.e. announcement of trainings, questions for the committee, etc., then it should be brought forth during this section. These comments would not be voted on by the committee.
 - b. Ms. Bell noted that St. Mary's will be adding 10 beds due to a certificate of need. There is a tentative plan to build a new building. She inquired if this change would need to be included within the LHRC report.
 - i. Mr. Small and Mr. McIntosh clarified that this is not a change in programming, simply an enhancement of programming.
 - ii. As a result, there is no need to include this change in the LHRC report.
- IV. Old Business – There was no Old Business to review.
- V. New Business
 - a. First Home Care (FHC) – Brandi Hoy, Program Manager – seeking affiliation. Ms. Hoy and her staff and programming were previously Institute for Family Centered Services. She provided copies of policies and procedures to the committee and spoke about programming (Intensive in-home using the Family Centered Treatment model, Mental Health Support Services, Sex Offender Counseling), staff training, supervision, age range for clients, and locations served.
 - i. Ms. Buracker made a motion to approve First Home Care affiliation with Henrico LHRC.
 - ii. Mr. Brown seconded the motion.
 - iii. FHC approved as a new affiliate to Henrico LHRC.
 - b. Safe Haven Family Services, Inc. - Mr. Stephen Crawford – seeking affiliation. Mr. Crawford is developing programming for a 4-bedroom group home for ID clients. He has not yet received licensure yet.

- i. The Committee allowed him to present now and they will vote on affiliation after he has received approval by licensure.
 - ii. Mr. Crawford relayed his home and program would serve up to 4 residents, ages 18+. Ratio of staff to residents would be 1 to 4. There would be a Program Director within the home at all times. He is currently looking at several properties in the Henrico area. The target start date is November 2013. Programming would focus on daily living skills, hygiene, outings, art therapy, and scripture and video review with a Minister if the clients wish to participate. Clients would most likely participate in a day treatment program outside of the Group Home 4 – 5 days a week.
 - iii. Mr. McIntosh noted since this is a proposed program, the Committee could make a motion to approve affiliation, which would be pended until it is approved by Central Office.
 - iv. He advised that the Committee would need to review a copy of the policies and procedures before affiliation could be granted.
 - v. Ms. Buracker suggested the committee wait to vote on the affiliation until Mr. Crawford has received approval from licensure and submitted policies and procedures.
 - vi. Mr. Brown agreed.
 - vii. Safe Haven Family Services, Inc. will present policies and procedures to the Committee once receipt of approval from licensure.
- c. Intercept – Amanda Ward – seeking additional location for TDT services in Hanover County. Currently Intercept provides TDT services in Henrico and Prince George Counties. Hanover has asked Intercept to add TDT services to support children with behavioral and emotional needs within the county schools.
 - i. Mr. McIntosh clarified this request was an expansion of an existing program.
 - ii. There were no questions from the Committee.
 - iii. Mr. Wills made a motion to accept the expansion.
 - iv. Ms. Buracker seconded the motion.
 - v. Intercept's expansion of TDT services approved.
- d. ClearVission – Derwin Hickman – seeking additional service affiliation for TDT. Mr. Hickman provided detailed information regarding the history and mission of ClearVission. ClearVission has been around for 9 years, working with children and families in Hopewell, Henrico, and Richmond. They currently provide Group Homes for ID population, day programming, and have recently added Intensive in-home and Mental Health Support Services. Hopewell schools and Hopewell CSA have asked ClearVission to provide TDT services to address the significant truancy issues that are covering emotional, behavioral, and family/environment issues for the children within the Elementary and Middle schools. The service approach they will use for the TDT services will be holistic, incorporate the family, and increase communication between the schools and families. They will teach safety, serve as role models, and reinforce appropriate boundaries. Staff will be QMHP-Cs that have the appropriate experience, education, and job history. He

described the interview process: a 2 panel interview with a writing sample. There would be a Case Manager and a Clinical Lead with 5 clients at first, with the goal to grow the agency. It is a 2 year contract.

- i. Ms. Buracker motioned to accept ClearrVission's request for additional service.
 - ii. Mr. Wills seconded the motion.
 - iii. ClearrVission's additional service request for TDT was approved.
- e. Mr. Small reported he would send an email to Les within DBHDS to inform him of these approvals and cc: the three affiliates so there is documentation of the approvals.
- f. Empowering Youth for Positive Change – Towanda Hickman – was added as an affiliate to Group B. She received approval as an affiliate at the Group A meeting.
- g. Quarterly Reports – Group B Reporting – All of Group B turned in reports.
 - i. Henrico Area Mental Health and Developmental Services
 1. Ms. Bernard described two incidents at the Committee's request.
 - a. A peer to peer in which client A received a superficial wound from client B. Client B is no longer in the program. Henrico did an investigation and it was determined that there was no staff neglect. It appears client B was attention-seeking.
 - b. The second incident involved a breach of confidentiality by a staff according to Henrico MH policy. The staff person was counseled and trained again in the agency's policy and state/federal policy. Henrico MH also changed their policy to clarify the limits of disclosure on child abuse.
 - ii. Internalized Mental Health Perspective
 1. No one was present from this agency.
 2. Mr. Small provided feedback on report:
 - a. The licensing specialist is not Ms. Flowers, as she is an advocate.
 - b. Please explain measures the agency is taking to counter rights violations.
 - iii. LONCHM'S, Inc. – Olivia's House/Maxwell's Place - The representative had a family emergency and was not present.
 - iv. Lutheran Family Services – Nothing to report.
 - v. NDUTIME Youth & Family Services, Inc.
 1. Changes to programming following licensure visits were reviewed:

- a. Ms. Luster visited a Therapeutic Group Home on 5/21. A Corrective Action Plan was put in place on 6/26. They have not heard a response.
 - b. Ms. Luster reviewed TDT services at the end of April 2013. A Corrective Action Plan was submitted in May 2013. No response as of yet.
 2. A new Director started on 6/17/13.
 3. The agency Site Supervisor became a Supervisor on 5/16/13.
 4. Two incidents were reviewed at the Committee's request:
 - a. One incident within a Group Home was discussed per Committee request. On 6/7 at 10:30pm a client engaged in a self-injurious action (scratched forearm) with a razor. Client reported incident to staff, who notified the supervisor, who notified the clinical supervisor. Crisis intervention occurred, and a safety plan was created. The Site Coordinator also spoke to the client's mother. The Clinical Supervisor spoke to the client the day following the incident and held a treatment team meeting. Family background, diagnoses, etc was provided to provide a clear picture of the client. Staff were found to have engaged in inappropriate conduct because the razor was in the client's trash can. All staff were trained on suicidal behaviors.
 - i. Mr. Wills inquired if the Group Home has a sharps box. This will be explored immediately as the answer was not known.
 - ii. Mr. Small encouraged the Group Home to consider the ability for the client to have a razor blade in his room due to his diagnoses and relationships with peers who have attempted suicide and 2 who have committed suicide.
 - b. The second incident occurred within TDT services. On April 28, 2013 a Crisis Wave Restarint was implemented for no more than a minute. The client was verbally aggressive, resisting directions, began to throw things, and punched the staff. The client calmed. She identifies engaging in such behavior because she did not get what she wanted. She had not been taking her medications consistently.
 5. Mr. Small reminded not to include client names in the LHRC reports.
- vi. Seton House – Nothing to report.
- vii. St. Mary's Behavioral Health Inpatient Unit Support One
 1. Ms. Bell spoke of one incident at the Committee's request. Two allegations were made by one patient regarding the same situation.

On April 3, 2013, a female client made allegations that a health tech inappropriately touched her while taking a temperature. The tech was interviewed by the Nurse Manager. St. Mary's reported the situation to HR. The techs were instructed to have two people to protect the client and the staff when working with this female from that point forward. A similar allegation was made by the same female on April 5, 2013. None of the allegations were determined founded. The female ceased such allegations and progressed in treatment.

viii. Support One

1. Ms. Clanton reviewed 2 incidents at the Committee's request.

- a. On April 12, 2013, a client was dropped off at the wrong home by Logisticare. The client was transported home by the residential program, and staff talked to the parent while they were in route. Neglect was determined to be founded.
- b. A nonverbal client within ended up with a broken femur. Four staff were interviewed individually. No one identified how the client was ambulatory. The client had no history of falling out of bed and no brittle bone syndrome. On that day, there were 3 staff to 4 individuals in the AM and 1 staff in the PM. The doctor reported it was a traumatic injury. Ms. Luster visited the agency and neglect was founded. The agency received a citation. All four staff were terminated because there is no clear report of what happened. The client is ok and finishing physical therapy at a facility in Goochland. She will return to their agency with the permission of her father.

- i. Mr. McIntosh asked what SupportOne will do during the hiring and training process to try to prevent such events from occurring again in future. The Executive Director, Ms. Schultz, spoke of how difficult this situation was and how they wanted the truth but were not getting it. He noted they are retraining all staff on how to handle emergencies because SupportOne policies were not followed. Their HR committee is looking at behavioral type of interview questions to get a better picture of candidates. He asked for advice from the Committee about interviewing.
- ii. Mr. McIntosh supported their efforts regarding the hiring process.
- iii. Mr. Wills encouraged SupportOne to keep their head up. This hit is a blow and created struggles in operations afterwards, but their focus remains on the client.

- iv. Mr. McIntosh echoed Mr. Wills comments. Keep trudging ahead and focus on the hiring process.
 - v. Ms. Buracker noted how the client may have responded negatively with her body language upon her return when around the staff that were present, but SupportOne did the right thing in letting the staff go.
 - ix. The Center for Child and Family Services, LLC – Nothing to report.
 - x. Tree of Life Services, Inc. – Nothing to report. The hospitalization for illness does not need to be included on the LHRC report because it is not an abuse/neglect situation.
- h. Group A – These agencies were not scheduled to attend this meeting. All of group A turned in reports. Mr. Wills reviewed and made motion to approve Group A reports on 7/10/13. Mr. McIntosh seconded the motion on 7/11/13, as he had also reviewed the reports.
- i. Attachment and Trauma Institute
 - ii. Braley and Thompson, Inc.
 - iii. Clearr Vision Support Services, LLC
 - iv. Clinical Alternatives, P.C.
 - v. Family Counseling Center for Recovery
 - vi. Family Focus
 - vii. Family Life Services
 - viii. Hartwood Foundation, Inc.
 - ix. Heart Havens
 - x. Intercept Youth Services, Inc.

VI. Secretary's Report

- a. Review of Provider Attendance Data – Ms. Fox, the Treasurer, could not attend due to extended illness. She has just been taken off bedrest.
 - i. Affiliates within Group B not present:
 - 1. Internalized Mental Health Perspective
 - 2. LONCHM'S, Inc. – Olivia's House/Maxwell's Place
- b. Brandi provided description of administrative duties of the Secretary. Updating the contact sheet. Sending out reminder emails about 3 weeks prior to the due date of the reports. Obtaining information from the Committee and Affiliates regarding agenda items. Sending out a tentative agenda about a week ahead of the meeting. Updating as necessary. Notifying Affiliates when reports are received. Printing reports from the gmail account and compiling packets for the Committee members to review during the LHRC meetings. Contacting affiliates after the report due date to obtain late reports. Print and bring copies of the agenda for the Committee members and the Affiliates. Take attendance at the meeting. Take minutes of the meeting. Send a copy of the minutes to the Committee and

Affiliates within 10 business days of the meeting. Communicate with the next administrative support person. Passing on paper copies of the reports to the next Secretary.

VII. Treasurer Update

- a. Ms. Fox reported the amount of money remains in the Henrico LHRC account. It has not changed. Group B voted to obtain tablets for the Committee members. No one from Group A participated in the conference call. This item is tabled until Group A can vote.

VIII. Advocate Report

- a. Mr. Small reported that in a year the CHRIS system will replace paper copies of incident reports.
- b. By June 1st, every provider began entering information into the CHRIS system. Providers must report ALL complaints – informal and formal.
- c. The advocate gets an email regarding the allegation, which is assigned a number. The advocate makes notations where the case can be closed or not, and the provider receives notification. He recommended the provider print the investigation summary and keep in the office.
- d. Any questions about reporting or complaints call him.
- e. Delta is the technical assistance for CHRIS.

IX. Adjournment – Mr. McIntosh adjourned the meeting at 7:51 PM.

X. The Executive Committee did not occur as the potential Committee Candidates did not get back to Mr. Small about interviewing that evening.

XI. 2013 Henrico LHRC Meeting Schedule at Henrico Mental Health at 6:00 PM

- a. Group A October 8 - ClearrVision Support Services, LLC will serve as the Administrative Support.
- b. Group B January 14 - Lutheran Family Services will serve as Administrative Support.